

CHAPTER 11

U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF MS
FILEDCase Name Daleson Enterprises, LLC d/b/a Jones County Rest HomeCase Number 05-50095 For Period August 1 to August 31

06 SEP 29 PM 3:19

CLARENCE J. KENNEDY
CLERK

THIS REPORT IS DUE 15 DAYS AFTER THE END OF THE MONTH. The debtor must attach each of the following forms unless the United States Trustee has waived the requirement in writing. File with the court and submit a paper copy to UST with an original signature.

Form Attached	Previously Waived	REQUIRED REPORTS/DOCUMENTS
{X}	{ }	Comparative Balance Sheet (FORM 2-B)
{X}	{ }	Profit and Loss Statement (FORM 2-C)
{X}	{ }	Cash Receipts and Disbursements Statement (FORM 2-D)
{X}	{ }	Supporting Schedules (FORM 2-E)
{X}	{ }	Narrative (FORM 2-F)
{X}	{ }	Copies of Bank Statement(s) and Reconciliations of Bank Balance to Book Balance for all Account(s)

I declare under penalty of perjury that the following Monthly Operating Report and any attachments thereto, are true and correct to the best of my knowledge and belief.

Executed on: 9-26-06
(date)

Debtor(s)*

Daleson Enterprises, LLC
d/b/a/ Jones County Rest Home

By:**

Position:

Member

Name of preparer:

Sandy Lindsey, CFO

Telephone No. of Preparer

601-758-1989

* both debtors must sign if a joint petition

** for corporate or partnership debtor

FORM 2-A
01/04

CASE NUMBER: 05-50095

COMPARATIVE BALANCE SHEET

ASSETS:

CURRENT ASSETS:

Cash.....

Accounts Receivable, Net.....

Inventory, at lower of cost or market.....

Prepaid expenses & deposits.....

Other

TOTAL CURRENT ASSETS.....

PROPERTY, PLANT & EQUIPMENT.....

Less Accumulated depreciation.....

NET PROPERTY, PLANT & EQUIPMENT.....

OTHER ASSETS

Certificate of Need Cost.....

Workers Comp Deposit.....

TOTAL OTHER ASSETS.....

TOTAL ASSETS.....

Month	Month	Month	Month	Month	Month	Month
02/28/06	3/31/06	4/30/06	5/31/06	6/30/06	7/31/06	8/31/06
484,792	493,990	481,860	474,009	493,145	462,635	452,953
309,586	285,252	284,454	283,999	259,578	259,578	259,571
0	0	0		0	0	0
0	0	0		0	0	0
620,268	620,268	620,268	620,268	620,268	620,268	620,268
1,414,646	1,399,510	1,386,582	1,378,276	1,372,991	1,342,481	1,332,792
254,993	254,993	254,993	254,993	254,993	254,993	254,993
0	0	0	0	0	0	0
254,993	254,993	254,993	254,993	254,993	254,993	254,993
715,738	715,738	715,738	715,738	715,738	715,738	715,738
94,435	94,435	94,435	94,435	94,435	94,435	94,435
810,173	810,173	810,173	810,173	810,173	810,173	810,173
2,479,812	2,464,676	2,451,748	2,443,442	2,438,157	2,407,647	2,397,958

If assets are carried at historical cost on debtor's accounting records and debtor elects to show them as such on the monthly reports, note the change above and include remarks on FORM 2-F (Narrative). All subsequent reports must then carry these assets at that value. Do not use historical cost one month and fair market value the next.

CASE NUMBER: 05-50095

COMPARATIVE BALANCE SHEET

LIABILITIES:

POST-PETITION LIABILITIES:

Taxes payable (Form 2-E, pg 1 of 3).....

Accounts payable (Form 2-E, pg 1 of 3).....

Other: Intercompany Accts./Etc.

TOTAL POST-PETITION LIABILITIES.....

PRE-PETITION LIABILITIES:

Notes payable – secured.....

Priority debt.....

Unsecured debt.....

Other Due Owner

TOTAL LIABILITIES.....

EQUITY (DEFICIT)

PREFERRED STOCK.....

COMMON STOCK.....

RETAINED EARNINGS:

Through filing date.....

Post Filing date.....

TOTAL EQUITY (NET WORTH).....

TOTAL LIABILITIES & EQUITY.....

Month	Month	Month	Month	Month	Month	Month
02/28/06	3/31/06	4/30/06	05/31/06	6/30/06	7/31/06	8/31/06
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
689,477	689,477	689,477	689,477	689,477	689,477	689,477
1,258,733	1,258,733	1,258,733	1,258,733	1,258,733	1,258,733	1,258,733
308,767	308,767	308,767	308,767	308,767	308,767	308,767
77,723	77,723	77,723	77,723	77,723	77,723	77,723
2,334,700	2,334,700	2,334,700	2,334,700	2,334,700	2,334,700	2,334,700
145,112	129,976	117,048	108,742	103,457	72,947	63,258
145,112	129,976	117,048	108,742	103,457	72,947	63,258
2,479.812	2,464.676	2,451,748	2,443,442	2,438,157	2,407.647	2,397.958

CASE NUMBER: 05-50095

PROFIT AND LOSS STATEMENT

SEE ATTACHED

NET REVENUE.....

COST OF GOODS SOLD:

Material.....

Labor - Direct.....

Manufacturing Overhead.....

TOTAL COST OF GOODS SOLD:.....

GROSS PROFIT:.....

OPERATING EXPENSES:

Selling and Marketing.....

General and administrative (rents, utilities, salaries, etc.)

Other _____

TOTAL OPERATING EXPENSES.....

INTREST EXPENSE.....

INCOME BEFORE DEPRECIATION OR TAXES:.....

DEPRECIATION OR AMORTIZATION.....

EXTRAORDINARY EXPENSES *

INCOME TAX EXPENSE (BENEFIT).....

NET INCOME (LOSS).....

Filing Date	Month	Month	Month	Month	Month	Month
	3/31/06	4/30/06	5/31/06	6/30/06	7/31/06	8/31/06
	0	0	0	0	0	0
	0	0	0	0	0	0
	0	0	0	0	0	0
	15,136	12,928	8,306	5,285	30,510	9,689
	15,136	12,928	8,306	5,285	30,510	9,689
	(15,136)	(12,928)	(8,306)	(5,285)	(30,510)	(9,689)
	0	0	0	0		0
	(15,136)	(12,928)	(8,306)	(5,285)	(30,510)	(9,689)

*Requires explanation in NARRATIVE (Form 2-F)

CASE NAME: Dalcson Enterprises, LLC d/b/a Jones County CASE NUMBER: 05-50095

Rest Home

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

For Period August 1 to August 31, 2006

Cash Reconciliation

1. Beginning Cash Balance (Ending cash balance from last month's report)		<u>\$ 462,635</u>
2. Cash Receipts (total Cash Receipts from page 2 of all FORM 2-D's)	<u>\$ 40</u>	
3. Cash Disbursements (total Cash Disbursements from page 3 of all FORM 2-D's)	<u>\$ 9,722</u>	
4. Net Cash Flow		<u>\$ (9,682)</u>
5. Ending Cash Balance (to FORM 2-B)		<u>\$ 452,953</u>

CASH SUMMARY – ENDING BALANCE

	<u>Amount*</u>	<u>Financial Institution</u>
1. Real Estate Account	\$	
2. Trust Account	<u>\$ 0</u>	<u>Trustmark</u>
3. Operating and/or Personal Account	<u>\$ 450,466</u>	<u>Trustmark</u>
4. Payroll Account	<u>\$ 2,487</u>	<u>Trustmark</u>
5. Tax Account	<u>\$</u>	
6. Other Accounts (Specify checking or savings)	<u>\$</u>	
7. Cash Collateral Account	<u>\$</u>	
8. Petty Cash	<u>\$</u>	
TOTAL (Must Agree with line 5 above)	<u>\$ 452,953</u>	

*These amounts should be equal to the previous month's balance for the account plus this month's receipts less this month's disbursements.

ADJUSTED CASH DISBURSEMENTS

Cash disbursements on Line 3 above less
inter-account transfers and UST fees paid \$ 9,722

*NOTE: This amount should be used
to determine UST quarterly fees due
and agree wit Form 2-D, page 2 of 4

FORM 2-D
Page 1 of 4
01/04

CASE NAME: Daleson Enterprises, LLC d/b/a Jones County CASE NUMBER: 05-50095

Rest Home

QUARTERLY FEE SUMMARY

MONTH ENDED August 2006

Payment Date	Cash Disbursements *	Quarterly Fee Due	Check No.	Date
January	\$ 274,900			
February	\$ 42,376			
March	\$ 14,295			
Total				
1 st Quarter	\$ 331,571	\$ 3,750		
April	\$ 12,196			
May	\$ 7,851			
June	\$ 6,594			
Total				
2 nd Quarter	\$ 26,641	\$ 500		
July	\$ 30,510			
August	\$ 9,722			
September	\$			
Total				
3 rd Quarter	\$	\$		
October	\$			
November	\$			
August	\$			
Total				
4 th Quarter	\$	\$		

FEE SCHEDULE

DISBURSEMENT CATEGORY	QUARTERLY FEE DUE
Less than \$15,000.00	\$250
\$15,000 - \$74,999.99	\$500
\$75,000 - \$149,999.99	\$750
\$150,000 - \$224,999.99	\$1,250
\$225,000 - \$299,999.99	\$1,500
\$300,000 - \$999,999.99	\$3,750
\$1,000,000 - \$1,999,999.99	\$5,000
\$2,000,000 - \$2,999,999.99	\$7,500
\$3,000,000 - \$4,999,999.99	\$8,000
\$5,000,000 and above	\$10,000

Note that a minimum payment of \$250 is due each quarter even if no disbursements are made in the case during the period.

* Note: should agree with "adjusted cash disbursements" at bottom of Form 2-D, Page 1 of 4. Disbursements are net of transfers to other debtor in possession bank accounts and net of payments of prior period quarterly fees.

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: Jones County Rest Home Account Number: 480-009-6701
Operating Account

CASH RECEIPTS JOURNAL

(attach additional sheets as necessary)

Date	Description (Source)	Amount
------	----------------------	--------

SEE ATTACHED

Total Cash Receipts \$ 0

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT
(This form should be completed for each type of account listed
on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: Jones County Rest Home Account Number: 480-009-6701
Operating

CASH DISBURSEMENTS JOURNAL
(attach additional sheets as necessary)

<u>Date</u>	<u>Check No.</u>	<u>Payee</u>	<u>Description (Purpose)*</u>	<u>Amount</u>
-------------	------------------	--------------	-------------------------------	---------------

SEE ATTACHED

Total Cash Disbursements \$ 0

*Identify any payments to professionals, owners, partners, shareholders,
Officers, director or any insiders and all adequate protection payments
Ordered by the court with an asterisk or highlighting. Any payments made
as a result of a court order, should indicate the order date.

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH Old Acct. Payable Account Number: 430-715-3379

CASH RECEIPTS JOURNAL

(attach additional sheets as necessary)

<u>Date</u>	<u>Description (Source)</u>	<u>Amount</u>
-------------	-----------------------------	---------------

SEE ATTACHED

Total Cash Receipts \$ 0

01/04

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 20 06

Account Name: JCRH New Accts. Payable Account Number: 480-009-6685

CASH RECEIPTS JOURNAL

(attach additional sheets as necessary)

<u>Date</u>	<u>Description (Source)</u>	<u>Amount</u>
-------------	-----------------------------	---------------

SEE ATTACHED

Total Cash Receipts \$ 40

JONES AT DEPOSITS - AUGUST 2006
Document Page 11 of 31

8/1/2006 Through 8/31/2006

9/25/2006

Page 1

Date	Account	Num	Description	Memo	Category	Clr	Amount
8/30/...	AP NEW JCRHDEP		DEPOSIT			R	40.00
TOTAL 8/1/2006 - 8/31/2006							40.00
TOTAL INFLOWS							40.00
TOTAL OUTFLOWS							0.00
NET TOTAL							40.00

01/04

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 20 06

Account Name: JCRH Payroll Account Number: 480-009-6693

CASH RECEIPTS JOURNAL

(attach additional sheets as necessary)

Date	Description (Source)	Amount
------	----------------------	--------

SEE ATTACHED

Total Cash Receipts \$ 0

01/04

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH Resident Trust Account Number: 480-009-6719

CASH RECEIPTS JOURNAL

(attach additional sheets as necessary)

<u>Date</u>	<u>Description (Source)</u>	<u>Amount</u>
-------------	-----------------------------	---------------

SEE ATTACHED

Total Cash Receipts \$ 0

01/04

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH Old Acct. Pay Account Number: 430-715-3349

CASH DISBURSEMENTS JOURNAL
(attach additional sheets as necessary)

Date	Check No.	Payee	Description (Purpose)*	Amount
------	-----------	-------	------------------------	--------

SEE ATTACHED

Total Cash Disbursements \$ 408

*Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

JONES OLLY AF PAYMENTS AUGUST 2006

8/1/2006 Through 8/31/2006

9/25/2006

Page 1

Date	Account	Num	Description	Memo	Category	Clr	Amount
8/10/...	DO NOT U...DEP		ACH DEBIT T...			R	-298.39
8/16/...	DO NOT U...DEP		ACH DEBIT M...			R	-109.59
TOTAL 8/1/2006 - 8/31/2006							-407.98
TOTAL INFLOWS							0.00
TOTAL OUTFLOWS							-407.98
NET TOTAL							-407.98

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT
(This form should be completed for each type of account listed
on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH New Acct. Payable Account Number: 480-009-6685

CASH DISBURSEMENTS JOURNAL
(attach additional sheets as necessary)

Date	Check No.	Payee	Description (Purpose)*	Amount
------	-----------	-------	------------------------	--------

SEE ATTACHED

Total Cash Disbursements \$ 9,314

*Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

Document Page 17 of 31

JONES AP PAYMENTS AUGUST 2006

8/1/2006 Through 8/31/2006

9/25/2006

Page 1

Date	Account	Num	Description	Memo	Category	Clr	Amount
8/7/2006	AP NEW JCRH3330		RAMONA Q. B...Proper...			R	-292.59
8/14/...	AP NEW JCRH3331		VINCE E NOW...Fecs&E...			R	-4,144.35
8/16/...	AP NEW JCRH3332		LARRY FORTE...				-2,285.00
8/16/...	AP NEW JCRH3333		LARRY RUSSELL			R	-2,285.00
8/16/...	AP NEW JCRH3334		LARRY FORTE...				-153.60
8/16/...	AP NEW JCRH3335		LARRY RUSSELL			R	-153.60
TOTAL 8/1/2006 - 8/31/2006							-9,314.14

TOTAL INFLOWS	0.00
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TOTAL OUTFLOWS	-9,314.14
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NET TOTAL	-9,314.14
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Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT
(This form should be completed for each type of account listed
on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH Payroll Account Number: 480-009-6693

CASH DISBURSEMENTS JOURNAL
(attach additional sheets as necessary)

Date	Check No.	Payee	Description (Purpose)*	Amount
------	-----------	-------	------------------------	--------

SEE ATTACHED

Total Cash Disbursements \$ 0

*Identify any payments to professionals, owners, partners, shareholders,
Officers, director or any insiders and all adequate protection payments
Ordered by the court with an asterisk or highlighting. Any payments made
as a result of a court order, should indicate the order date.

Case Name: Daleson Enterprises d/b/a Jones
County Rest Home

Case Number: 05-50095

CASH RECEIPTS AND DISBURSEMENTS STATEMENT
(This form should be completed for each type of account listed
on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period August 1 to August 31, 2006

Account Name: JCRH Resident Trust Account Number: 480-009-6719

CASH DISBURSEMENTS JOURNAL
(attach additional sheets as necessary)

Date	Check No.	Payee	Description (Purpose)*	Amount
------	-----------	-------	------------------------	--------

SEE ATTACHED

Total Cash Disbursements \$ 0

*Identify any payments to professionals, owners, partners, shareholders,
Officers, director or any insiders and all adequate protection payments
Ordered by the court with an asterisk or highlighting. Any payments made
as a result of a court order, should indicate the order date.

CASE NAME: Daleson Enterprises d/b/a Jones
County Rest Home

CASE NUMBER: 05-50095

SUPPORTING SCHEDULES

For Period August 1 to August 31, 20 06

POST-PETITION ACCOUNTS PAYABLE AGING REPORT

TYPE	INCURRED	DUE	0-30	31-60	61-90	OVER 90
FITW	0	0	\$	\$	\$	
FICA	0	0				
FUTA	0	0				
SITW	0	0				
SUTA	0	0				
OTHER TAX						
TRADE						
PAYABLES						
OTHER	0	0				
Retirement	0	0				
Accrued PR	0	0				
Bonus	0	0				
TOTALS	0	0	\$	\$	\$	\$

CASE NAME: Daleson Enterprises, LLC dba Jones Cty Rest Home CASE NUMBER: 05-50095

SUPPORTING SCHEDULES

For Period August 1 To August 31 2006

INSURANCE SCHEDULE

Type	Carrier/Agent	Coverage (\$)	Date of Expiration	Premium Paid
Workers' Compensation	MSHCA	\$100,000	1/1/06	NO
General Liability	CULIC	\$500,000	10/7/06	CANCELLED
Property (Fire, Theft)	Fox Everett	\$500,000	8/30/06	CANCELLED
Vehicle				
Other (list):				

- (1) Attach copy of certificate of insurance or declaration page of policy for any coverage renewed or replaced during the current reporting month.
- (2) For the premium paid column enter "yes" if payment of premium is current or "no" if premium payment is delinquent. If "no", explain on Form 2-F, Narrative.

01/04

CASE NAME: Daleson Enterprises, LLC dba Jones Cty Rest Home
CASE NUMBER: 05-50095

NARRATIVE STATEMENT

For Period August 1 to August 31, 20 06

Please provide a brief description of the significant business and legal action by the debtor, its creditor or the court during the reporting period. Comments should include any change in bank accounts, explanation of extraordinary expenses, and purpose of any new post-petition financing. Comments should also include debtor's efforts during the month to rehabilitate the business and to develop a plan.

AP NEW JCRH
9/7/2006

Page 1

Reconciliation Summary

BANK STATEMENT -- CLEARED TRANSACTIONS:

Previous Balance:			485,885.87
Checks and Payments	10	Items	-36,700.39
Deposits and Other Credits	1	Item	40.00
Service Charge	0	Items	0.00
Interest Earned	0	Items	0.00
Ending Balance of Bank Statement:			449,225.48

YOUR RECORDS -- UNCLEARED TRANSACTIONS:

Cleared Balance:			449,225.48
Checks and Payments	12	Items	-10,000.49
Deposits and Other Credits	0	Items	0.00
Register Balance as of 8/31/2006:			439,224.99
Checks and Payments	0	Items	0.00
Deposits and Other Credits	0	Items	0.00
Register Ending Balance:			439,224.99

AP NEW JCRH
9/7/2006

Page 2

Uncleared Transaction Detail up to 8/31/2006

Date	Num	Payee	Memo	Category	Clr	Amount
Uncleared Checks and Payments						
5/11/2005	2296	GARY D. THRASH		GARNISHMENT		-457.89
7/13/2005	2556	WILLIAM G. CLARK				-800.00
8/12/2005	2658	WILLIAM G. CLARK				-800.00
9/14/2005	2821	WILLIAM G. CLARK				-800.00
10/14/2005	2962	WILLIAM G. CLARK				-800.00
11/15/2005	3092	WILLIAM G. CLARK				-800.00
12/15/2005	3180	WILLIAM G. CLARK				-800.00
1/10/2006	3235	WILLIAM G. CLARK				-800.00
1/12/2006	3243	ELLEN GRAVES				-20.00
2/15/2006	3280	JOHN D. MCCORMICK				-1,484.00
8/16/2006	3332	LARRY FORTENBERRY				-2,285.00
8/16/2006	3334	LARRY FORTENBERRY				-153.60
Total Uncleared Checks and Payments				12 Items		-10,000.49
Uncleared Deposits and Other Credits						
Total Uncleared Deposits and Other Credits				0 Items		0.00
Total Uncleared Transactions				12 Items		-10,000.49



Trustmark
National Bank

Small Business Checking

Statement Period
From 8/01/2006 To 8/31/2006

Account Number
480-009-6685

10 Images Included



DALESON ENTERPRISE LLC DBA JONES COUNTY
REST HOME ACCT PAYABLE DEBTOR IN
POSSESSION CHAP 11 CASE NO 05-50095
PO BOX 345
SUMRALL MS 39482-0345

Customer Service:

1-800-243-2524 or 1-601-961-6000
Automated Response: 24 hours/day
Representative: Mon. - Fri. 8am-5pm.
Sat. 9am-7pm

For questions, or to receive a Trustmark Access Number for use with automated services, call during Representative hours and choose option '0'

Website address: www.trustmark.com



Summary

Description	Transactions	Amount
Balance last statement		485,885.87
Deposits and other credits	1	+ 40.00
Checks and other withdrawals	10	- 36,700.39
Service charges		- .00
Balance this statement		\$449,225.48

Note: Your lowest balance during this period was \$449,185.48, and it occurred on 8/23/2006.



Deposits and Other Credits

Date	Amount	Description
8/29	40.00	DEPOSIT

Total of Deposits and Other Credits: \$40.00



Checks and Other Withdrawals

Checks Paid

Number of images included in this statement: 10

Number	Date Paid	Amount	Number	Date Paid	Amount	Number	Date Paid	Amount
3320	8 /2	2,285.00	3328	8 /1	2,307.35	3333 #	8 /23	2,285.00
3321	8 /1	2,285.00	3329	8 /2	335.00	3335 #	8 /23	153.60
3326 #	8 /1	22,112.50	3330	8 /10	292.59			
3327	8 /4	500.00	3331	8 /21	4,144.35			

AUGUST

DO NOT USE JCRH AP
9/7/2006

Page 1

Reconciliation Summary

BANK STATEMENT -- CLEARED TRANSACTIONS:

Previous Balance:			3,042.13
Checks and Payments	2	Items	-407.98
Deposits and Other Credits	0	Items	0.00
Service Charge	0	Items	0.00
Interest Earned	0	Items	0.00
Ending Balance of Bank Statement:			2,634.15

YOUR RECORDS -- UNCLEARED TRANSACTIONS:

Cleared Balance:			2,634.15
Checks and Payments	0	Items	0.00
Deposits and Other Credits	0	Items	0.00
Register Balance as of 8/31/2006:			2,634.15
Checks and Payments	0	Items	0.00
Deposits and Other Credits	0	Items	0.00
Register Ending Balance:			2,634.15

DO NOT USE JCRH AP
9/7/2006

Page 2

Uncleared Transaction Detail up to 8/31/2006

Date	Num	Payee	Memo	Category	Clr	Amount
Uncleared Checks and Payments						
Total Uncleared Checks and Payments				0 Items		0.00
Uncleared Deposits and Other Credits						
Total Uncleared Deposits and Other Credits				0 Items		0.00
Total Uncleared Transactions				0 Items		0.00

Small Business Checking

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Trustmark

National Bank

Statement Period
From 8/01/2006 To 8/31/2006Account Number
430-715-3349DALESON ENTERPRISE LLC DBA
JONES COUNTY REST HOME
ACCOUNTS PAYABLE
PO BOX 345
SUMRALL MS 39482-0345*Customer Service:*1-800-243-2524 or 1-601-961-6000
Automated Response 24 hours day
Representative Mon-Fri 8am-5pm
Sat 9am-2pmFor questions or to receive a Trustmark Access
Number for use with automated services, call
during Representative hours and choose option '0'.Website address: www.trustmark.com**Summary**

Description	Transactions	Amount
Balance last statement		3,042.13
Deposits and other credits		+ .00
Checks and other withdrawals	2	- 407.98
Service charges		- .00
Balance this statement		\$2,634.15
<i>Note: Your lowest balance during this period was \$2,634.15, and it occurred on 8/16/2006.</i>		

**Checks and Other Withdrawals****Other Electronic Transactions**

Date	Amount	Description
8/10	298.39	ACH DEBIT AXA EQUITABLE INS. PAYMT PPD 22009572334903
8/16	109.59	ACH DEBIT METLIFE PAYMENT PPD 10000771914
<i>Total of Other Electronic Transactions: \$407.98</i>		

AUGUST

PR NEW JCRH
9/7/2006

Page 1

Reconciliation Summary

BANK STATEMENT -- CLEARED TRANSACTIONS:

Previous Balance:			3,635.84
Checks and Payments	0	Items	0.00
Deposits and Other Credits	11	Items	0.00
Service Charge	0	Items	0.00
Interest Earned	0	Items	0.00
Ending Balance of Bank Statement:			3,635.84

YOUR RECORDS -- UNCLEARED TRANSACTIONS:

Cleared Balance:			3,635.84
Checks and Payments	2	Items	-1,148.61
Deposits and Other Credits	0	Items	0.00
Register Balance as of 8/31/2006:			2,487.23
Checks and Payments	0	Items	0.00
Deposits and Other Credits	0	Items	0.00
Register Ending Balance:			2,487.23

PR NEW JCRH
9/7/2006

Page 2

Uncleared Transaction Detail up to 8/31/2006

Date	Num	Payee	Memo	Category	Clr	Amount
Uncleared Checks and Payments						
1/6/2006	4022	2021 Kendra Barnett				-387.57
1/6/2006	4032	1878 LINDSEY SANDERS		Salary		-761.04
Total Uncleared Checks and Payments				2 Items		-1,148.61
Uncleared Deposits and Other Credits						
Total Uncleared Deposits and Other Credits				0 Items		0.00
Total Uncleared Transactions				2 Items		-1,148.61

Small Business Checking

Page 1 of 2

Trustmark

National Bank

Statement Period
 From 8/01/2006 To 8/31/2006

Account Number
 480-009-6693

 DALESON ENTERPRISE LLC DBA JONES COUNTY
 REST HOME PAYROLL ACCT DEBTOR IN
 POSSESSION CHAP 11 CASE NO 05-50095
 PO BOX 345
 SUMRALL MS 39482-0345
Customer Service:
 1-800-243-2524 or 1-601-961-6000
 Automated Response 24 hours day
 Representative Mon. - Fri. 8am-5pm
 Sat. 9am-7pm

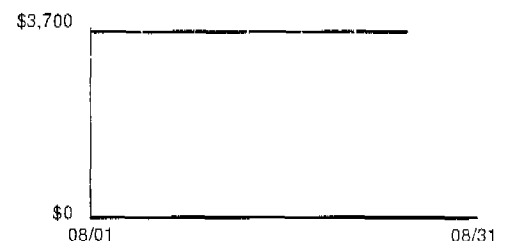
 For questions or to receive a Trustmark Access
 Number for use with automated services call
 during Representative hours and choose option 10

Website address: www.trustmark.com
**Summary**

Description	Transactions	Amount
Balance last statement		3,635.84
Deposits and other credits		+ .00
Checks and other withdrawals		- .00
Service charges		- .00
Balance this statement		\$3,635.84

Note: Your lowest balance during this period was \$3,635.84, and it occurred on 8/1/2006.
**Daily Balance History**

Date	Balance	Date	Balance
8/1	\$3,635.84	8/31	\$3,635.84


Your Balance this Period
 — Balance

AUGUST